ELDERLY DEPRESSION

Mental health problems of older adults reflect the range of emotional issues and psychiatric disorders found in younger populations. Elderly persons, however, are at much greater risk for some conditions such as serious cognitive impairment, a risk that increases substantially with age. Those at highest risk for mental health problems also have a concurrent medical illness. Depression and substance abuse can be triggered by social isolation, chronic disabling conditions, and feelings of helplessness and loss. However, many of these illnesses can be accurately diagnosed and treated.

Who it affects

There are currently about 32 million persons age 65 years or older in the United States, or about 12.5 percent of the population. While the majority of functioning older persons are quite well physically, emotionally, psychologically, economically, and socially, leading satisfying and productive lives, a significant portion, estimated at 10 percent to 20 percent in a given year, have mental health problems that affect the way they live, their family and social relationships, and their involvement in the community. It has been estimated that currently there are between 3.2 and 6.4 million older Americans whose mental and emotional problems are serious enough to warrant either professional care or involvement in organized self-help programs. Depression is a prevalent mental health problem among older persons living both in the community and in nursing homes.

- It is estimated that approximately 15 percent of community residents suffer from depressive symptoms and 1 to 2 percent from major clinical depression. The rates of minor or major depression among nursing home residents range from 15 percent to 25 percent.
- Suicide by the older adult person is a major mental health concern in the United States, with older persons committing 20 percent all suicides, while comprising 12.5 percent of the total population. In addition, the suicide rate for those persons aged 65-74 was 16.9 per 100,000, 23.5 for person 74-84, and 24.0 for those 85 years or older.
- Alcohol abuse is estimated to be a serious problem for 1.2 to 2.3 million older people.

Physical effects

As people age, it's not uncommon for them to suffer depression. The problem occurs when depression is confused with normal, age-related changes, such as appetite loss, reduced physical activity, stooped posture, and disrupted sleep patterns. Older persons often will deny being depressed.

Either they don't recognize it or they don't wish to share their feelings with others. Sometimes emotions like sadness, irritability, anger, paranoia, or hostility may dominate the behavior of a depressed person. It is not uncommon for depression to be confused with dementia or memory loss.

- Underlying symptoms of depression often are signaled by health complaints for which there is no medical basis. Many times, older people express emotional distress in terms of bodily symptoms. They may say "their body feels heavy all over".
- Physical illness and depression can occur at the same time in an individual, which can make an accurate diagnosis difficult. Untreated depression can worsen or complicate a coexisting medical problem.

Warning signs

Family members and friends need to recognize the common signs of depression so professional help, if needed, can be sought. Remember, there is no single sign of depression. An accurate assessment of depression often depends on observation of a cluster of symptoms.

• Depression's main feature is persistent sadness that may last for two weeks or more. It will be accompanied by changes in the person's usual patterns, behavior, or moods.

Some other symptoms are listed below. If you notice one or more of them, it may be a sign of depression in an elderly family member.

- Physical changes, such as aches and pains, complaints, weight changes, appetite changes, fatigue, lack of energy, or a change in sleeping patterns.
- Emotional symptoms, such as an overall "empty" mood, apathy, crying without reason, or indifference.
- Changes in the thought process and having feelings of hopelessness, pessimism, helplessness, self-reproach, or excessive guilt. A person experiencing depression also will show symptoms of slow or disorganized thinking, lack of concentration or memory problems, and indecisiveness. They may experience thought of death or suicide.
- Behavioral changes, such as a loss of interest in previously enjoyed activities, sexual disinterest, and neglect of appearance or hygiene. They may also experience difficulty with ordinary daily tasks, withdrawal from people, and an increase in alcohol or other drug use. They will often be irritable, hostile, show signs of agitation, pacing, and restlessness.

What to do

Don't ignore noticeable changes in an older person's behavior or moods. These changes could be symptoms of depression or other conditions for which help is available. Seek medical and psychiatric evaluation which can lead to treatment that can return an older person to a productive and happy life.